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PTO/SB/08A (08-00)

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 3

Complete if Known

Application Number	10/020,779
Filing Date	December 14, 2001
First Named Inventor	Swix
Group Art Unit	3622
Examiner Name	VanBramer, John W.
Attorney Docket Number	01377

U.S. PATENT DOCUMENTS

Examiner Initials *	Cite No.:	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Substitute for form 1449A/PTO <h2 style="text-align: center; margin: 10px 0;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h2> <p style="text-align: center; margin: 10px 0;"><i>(use as many sheets as necessary)</i></p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">Complete if Known</th> </tr> <tr> <td style="width: 40%; padding: 2px;">Application Number</td> <td style="padding: 2px;">10/020,779</td> </tr> <tr> <td style="padding: 2px;">Filing Date</td> <td style="padding: 2px;">December 14, 2001</td> </tr> <tr> <td style="padding: 2px;">First Named Inventor</td> <td style="padding: 2px;">Swix</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit</td> <td style="padding: 2px;">3622</td> </tr> <tr> <td style="padding: 2px;">Examiner Name</td> <td style="padding: 2px;">VanBramer, John W.</td> </tr> <tr> <td style="padding: 2px;">Attorney Docket Number</td> <td style="padding: 2px;">01377</td> </tr> </table>		Complete if Known		Application Number	10/020,779	Filing Date	December 14, 2001	First Named Inventor	Swix	Group Art Unit	3622	Examiner Name	VanBramer, John W.	Attorney Docket Number	01377
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Examiner Signature		Date Considered	
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¹ EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

² Unique citation designation number. ³ Applicant is to place a check mark here if English language Translation is attached.

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